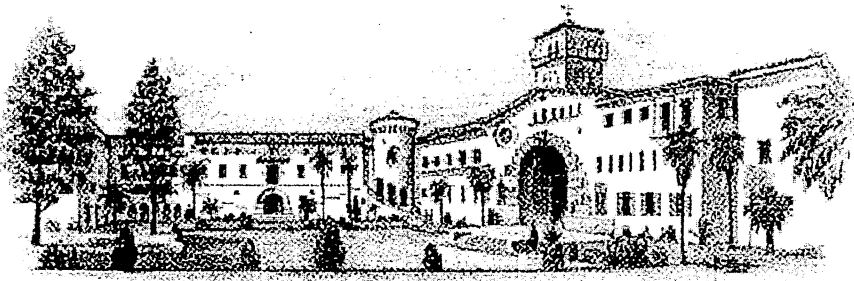


**Peter Adam**  
Fourth District Supervisor



**Fourth District Office**  
100 E. Locust Ave., Ste. 101  
Lompoc, CA 93436  
officeofpeteradam@countyofsb.org

**COUNTY OF SANTA BARBARA**

Date: February 10, 2017

Clerk of the Board of Supervisors  
County of Santa Barbara  
105 East Anapamu Street  
Santa Barbara, CA 93101

2017 FEB 14 PM 1:14  
COUNTY OF SANTA BARBARA  
CLERK OF THE  
BOARD OF SUPERVISORS

RE: Committee, Commission or Board District Appointment

For placement on the Board of Supervisors agenda for the meeting of:  
February 28, 2017

I would like to recommend the  appointment/  reappointment of the following person to the:  
Housing Authority

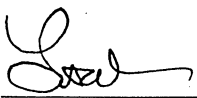
Salutation:  Mr  Mrs  Ms.  
Full Name of Appointee: James Pearson  
Address:  
City/State/Zip:  
Home Phone:  
Work Phone:  
E-mail:

Appointee will represent the Fourth District on this commission.

Position was formerly held by:

Check box only if this appointment is filling an unexpired vacancy.

Fourth District Supervisor: Peter Adam

Signed by:  for Peter Adam

COB Information Verification	
<input type="checkbox"/>	Letter of Resignation on file
<input type="checkbox"/>	Vacancy Notice on file
Term:	
<input type="checkbox"/>	_____ years
<input type="checkbox"/>	Beginning date _____
<input type="checkbox"/>	Ending date _____

**APPLICATION FOR  
COUNTY OF SANTA BARBARA  
BOARD, COMMISSION OR COMMITTEE**

Return to: Clerk of the Board of Supervisors  
105 E. Anapamu Street, Room 407  
Santa Barbara, CA 93101

DATE RECEIVED

Copy to Supervisor

**Instructions:** Please complete each section below. Be sure to enter the title of the Board, Commission or Committee (only one per application) for which you desire consideration in Box 1. For more complete information or assistance, contact the Clerk of the Board of Supervisors. **Please print in ink or type. Please note that ALL information provided is a matter of public record, and is subject to disclosure.**

**1. APPLYING FOR:** (Use Specific Title of Board, Commission or Committee)  
*Housing Authority of the County of Santa Barbara Commissioner (Tenant)*

**2. TODAY'S DATE:**  
*2/2/17*

**3. NAME:**  
*Person*                      *James*                      *Edward*  
Last                                      First                                      Middle

**4. E-MAIL ADDRESS:**

**6. ADDRESS:**  
\_\_\_\_\_  
Number                                      Street  
\_\_\_\_\_  
City                                      Zip Code

**5. TELEPHONE:**  
Home: \_\_\_\_\_  
Business: \_\_\_\_\_

**7. REFERENCES:** Give names and addresses of three (3) individuals (not relatives) who have knowledge of your character, experience, community involvement, and abilities.

NAME	ADDRESS	TELEPHONE	OCCUPATION
<i>James Mosby</i>			<i>Lompoc City Council Member</i>
<i>Paul Bommersbach</i>			<i>Lompoc High School Principal</i>
<i>Cory Philley</i>			<i>Lompoc HS, Teacher Special Education</i>

**8. Are you, or have you ever been, employed by the County of Santa Barbara?**  No  Yes - if yes, list below

Department: *The County (17055) In Home Support Services* Title: *Case Manager* Date: *9/16/16*

**9. PLEASE CHECK APPROPRIATE BOXES (OPTIONAL):**  
Ethnic or Racial Identity:  
 White  
 African American  
 Hispanic  
 Asian/Pacific Islander  
 Native American/Alaskan Native  
 Other (please specify):

**10. EDUCATION COMPLETED:**  
*As. Elementary Education*

**11. INDICATE SUPERVISOR WHO WILL RECEIVE A COPY OF APPLICATION:**  
*Peter Adams*

**12. EXPERIENCE:** Please explain why you are interested in serving, and what experience you bring to the Committee. Attach additional documentation as necessary.

*please see resume attached of experience and work history*

**13. ADDITIONAL INFORMATION:** Give any information explaining qualifications, experience, training, education, volunteer activities, community organization memberships, or personal interests that bear on your application for the above Board, Commission or Committee. Attach additional sheets as necessary.

*please see all related attached documents of training, appointments, certifications and awards.*

**14. SIGNATURE OF APPLICANT:** *James E. Person*